


U.S. APPLICATION NO. <b>10/527702</b>		INTERNATIONAL APPLICATION NO. <b>PCT/FR03/002697</b>		ATTORNEY'S DOCKET NUMBER <b>004900-271</b>	
21. <input type="checkbox"/> Applicant(s) requests that the published application include the following assignment information: _____ _____ _____ _____ _____				<b>CALCULATIONS PTO USE ONLY</b>	
22. <input checked="" type="checkbox"/> The following fees are submitted:					
Basic Filing Fee (1631)				\$ 300.00	
Surcharge of \$130.00 (1617) for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)).				\$ 0.00	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	\$	
Total Claims	42	-20 = 22	x \$50.00 (1615)	\$ 1,100.00	
Independent Claims	3	-3 = 0	x \$200.00 (1614)	\$ 0.00	
MULTIPLE DEPENDENT CLAIM(S) (if applicable)				+ \$360.00 (1616)	
Examination Fee				+ \$200.00 (1633)	\$ 200.00
Search Fee				+ \$500.00 (1632)	\$ 500.00
App. Size Fee (add \$250.00 for each add'l 50 sheets exceeding 100 sheets)				\$ 250.00	
TOTAL OF ABOVE CALCULATIONS =				\$ 2,350.00	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.				+ \$ 0.00	
SUBTOTAL =				\$ 2,350.00	
Processing fee of \$130.00 (1618) for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				\$ 0.00	
TOTAL NATIONAL FEE =				\$ 2,350.00	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 (8021) per property +					
TOTAL FEES ENCLOSED =				\$ 2,350.00	
				Amount to be refunded:	
				charged:	
a. <input checked="" type="checkbox"/> A check in the amount of <u>\$ 2,350.00</u> to cover the above fees is enclosed.					
b. <input type="checkbox"/> Please charge my Deposit Account No. <u>02-4800</u> in the amount of _____ to cover the above fees. A duplicate copy of this sheet is enclosed.					
c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>02-4800</u> . A duplicate copy of this sheet is enclosed.					
d. <input type="checkbox"/> Charge _____ to credit card. Form PTO-2038 is attached.					
NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.					
SEND ALL CORRESPONDENCE TO:  Burns, Doane, Swecker & Mathis, L.L.P. P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620					
				 SIGNATURE	
				Mary Katherine Baumeister NAME	
				26,254	March 11, 2005
				REGISTRATION NO.	DATE